

Health Literacy: Recognizing Its Importance in ESL Instruction

H *health literacy* is defined by Harvard health literacy specialist Rima Rudd as the ability to use English to solve health-related problems at a proficiency level that enables one to achieve one's health goals and to develop health knowledge and potential. Rudd's definition addresses the significant linguistic and cultural obstacles that nonnative English speakers often encounter when seeking healthcare in the United States.

Needs and Responses

Patients today must be proactive and self-advocating. Technological and pharmacological advances in the medical field create multiple treatment options, and patients must make complicated decisions about their medical care.

Health professionals are responding in several ways to improve access to healthcare services for nonnative English speakers. Some are assessing patients' literacy levels, rewriting educational materials in plain language, and providing patients with oral and video instructions in addition to written materials. Written materials are being translated into other languages, and medical professionals are receiving cultural sensitivity training. Some healthcare facilities are also using certified medical interpreters.

Understanding Obstacles

- ◆ Adult English language learners (ELLs) often lack access to basic healthcare services due to language barriers, lack of insurance, lack of information on available low-cost services, or fear of jeopardizing their immigration status by utilizing such services.
- ◆ Because of their lack of English language skills, ELLs may be unable to formulate appropriate questions in a medical setting or comprehend basic instructions without an interpreter. Many immigrants use their children as interpreters. This creates problems for the adults who fear losing status with their children, for the healthcare professionals who must deal with a child rather than an adult, and for the children who are put in situations where they are expected to function as adults and to convey intimate health information about their parents.
- ◆ Some ELLs may lack an educational background in basic human physiology, which precludes comprehension of treatment information even with an interpreter's help.
- ◆ Unaware of the U.S. healthcare culture, adult ELLs often do not know what is expected of them as patients (preventive behaviors, treatment com-

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Her NCLE's Worth



NCLE talks with *Kate Singleton*, ESL teacher for Fairfax County (Virginia) Adult Education and author of this issue's feature article on health literacy.

Miriam Burt: Kate, how did you get interested in health literacy instruction for adult English language learners?

Kate Singleton: It started with my personal experience with the healthcare system. I had to work really hard to get appropriate care. At the same time, I saw that my students—particularly those at the very beginning level who had little education and even less English—were finding it impossible to access the care they needed.

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English Literacy/Civics Education Projects Share and Plan

The English Literacy and Civics Education Program was announced in November 1999 by the U.S. Department of Education's Office of Vocational and Adult Education (OVAE). State and local organizations that were seeking to expand adult English literacy and civics instructional services could apply for 2-year grants. After a competitive review process, 12 organizations throughout the country were awarded grants, which are running from Spring 2000 through Summer 2002.

Some of the grant projects integrated English language learning and civics for unique populations, such as elderly immigrants, ex-offenders, and migrant workers. Working from a different perspective, other projects developed curriculums and teacher trainings that integrated English language and civics instruction.

In January 2002, the projects' staff members, selected state adult education representatives, and OVAE staff met to share information and updates on the projects. The 2-day conference provided an opportunity for all stakeholders involved in the program to share information, challenges, and insights and to plan their next steps. OVAE staff and state representatives presented news and information from their areas, heard concerns and issues from the field, and gathered information on the projects for further dissemination. Project staff outlined their projects, described successes and challenges, and presented products that have been developed.

To read the complete meeting summary and for information on the individual projects, visit www.ed.gov/offices/OVAE/AdultED/ELCivics.

OVAE Holds Public Meetings

The U.S. Department of Education's Office of Vocational and Adult Education will hold public meetings this summer to hear comments on the reauthorization of the Adult Education and Family Literacy Act (AEFLA). This is Title II of the Workforce Investment Act, the legislation that provides funding for adult education programs. For meeting dates and places visit the OVAE Web site at www.ed.gov/offices/OVAE.

DAEL Greets New Director

In June, the U.S. Department of Education's Division of Adult Education and Literacy greeted Cheryl Keenan as its new director. Ms. Keenan was formerly director of the Bureau of Adult Basic and Literacy Education at the Pennsylvania Department of Education and has been integral in shaping and implementing the new requirements in Title II of the Workforce Investment Act of 1998. In her new role, Ms. Keenan oversees the office that funds almost \$600 million in state and local grant programs for adult literacy and high school completion.

English Literacy Learners on the Rise

English literacy learners accounted for 42% of all adult education participants in 2001, up 4% from the previous year. In 2002, an even greater increase is expected as a result of additional foreign residents learning English in order to apply for citizenship. The Immigration and Naturalization Service says applications for citizenship more than doubled immediately following September 11.

Don't Hide Your Light Under a Bushel!

Have you produced a paper, conference presentation, lesson plan, curriculum, research report, or program description/evaluation in language and literacy education for adults learning English? By contributing to one of the most visible and accessible sources of education information—the ERIC database—your work is made available to colleagues throughout the world.

NCLE collects and evaluates materials for the ERIC database. To submit your work, contact Lynda Terrill (lterrill@cal.org) or send a copy of the document and a completed ERIC Reproduction Release Form (downloadable at <http://eriefac.piccard.csc.com/submitting.html#errp>) to

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Health Literacy—Continued from page 1

pliance, proactive questioning, provision of medical history, and payment procedures) nor what they should expect of care providers (right to an interpreter, to have questions answered and information clarified, and to a second opinion).

- ◆ Culturally biased health materials can be another obstacle for ELLs. The 1993 National Adult Literacy Survey (NALS) results showed the majority of marginally literate adults to be white and native born. Many health education materials are culturally and idiomatically directed to this population, making the content less accessible to those from other backgrounds.

Meeting Challenges

- ◆ Instructors may find the personal nature of health discussions uncomfortable in their classes and may need to broaden their knowledge of the availability of health resources in their community. They can access information in the community by forming partnerships with health professionals. Information on insurance and other healthcare culture issues can also be found on the Internet.
- ◆ Teachers may be unfamiliar with their students' cultural beliefs on health issues. In the classroom, students should be given the choice whether or not to share personal stories and beliefs such as traditional health practices from their native culture.
- ◆ Instructors of students with minimal English literacy must select health materials carefully. Health education materials usually target adults with an

eighth- to tenth-grade reading level. Many adults—both native and non-native English speakers—read significantly below these levels and thus have difficulty utilizing healthcare safely and effectively. If written information appropriate for students' reading levels is unavailable, the teacher can present information orally.

- ◆ Cartoons and illustrations from brochures and textbooks, especially those of isolated body parts, may be unclear or offensive to English language learners, especially to students with limited literacy in their native language. Teachers need to be aware of these issues and prepared to use other, more appropriate resources.

Conclusion

Adult English language learners face significant social, linguistic, and cultural obstacles to healthcare self-efficacy. Ensuring that learners have the literacy skills and cultural information necessary to access the proper care means specific training and lesson preparation for instructors, collaboration with healthcare providers, and recognition of the importance of health literacy by program administrators and funders. ■

This article is excerpted from the NCLE Q&A, Health Literacy and Adult English Language Learners, written by K. Singleton (February 2002). The complete Q&A is available on NCLE's Web site (www.cal.org/ncle/digests/healthlitQA.htm) or in print (202-362-0700 x200; ncle@cal.org). The Q&A provides an extensive list of resources on the subject. Additionally, Picture Stories for Adult ESL Health Literacy, created by the author, is available at www.cal.org/ncle/health.

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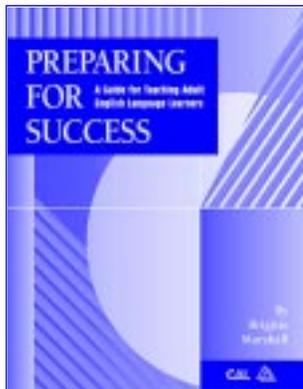
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Resource Updates



Recent legislation, including welfare reform initiatives and the Workforce Investment Act, underscore the demands being placed on education by the employment market. How can instructors working with adult English language learners respond to these demands and

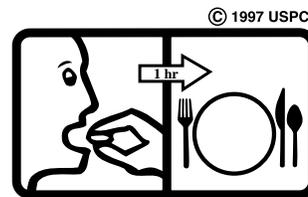
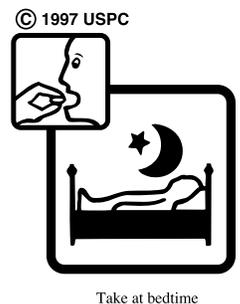
integrate employment participation skills into instruction? How can instruction be informed by initiatives such as the Secretary's Commission on Achieving Necessary Skills (SCANS) and Equipped For the Future (EFF)? **Preparing for Success: A Guide for Teaching Adult English Language Learners** by Brigitte Marshall addresses these issues. The book is designed for teachers of adult English language learners at all levels and includes classroom activities and instructional resources.

Published by the Center for Applied Linguistics and Delta Systems Co., Inc., *Preparing for Success* can be ordered online at the CALStore (www.cal.org/store) or through Delta Systems (800-323-8270; www.delta-systems.com).

The **Center for Southeast Asian Studies** at the University of Hawaii is offering over 2,000 photographs of Southeast Asia on its Web site (www.hawaii.edu/cseas/outreach/picarchive.html). During the summer of 2000, the outreach coordinator and a master's student in the Southeast Asian Studies program traveled to 10 Southeast Asian countries where they photographed scenes of daily life. Teachers and students are encouraged to download the images to use for educational purposes.



The **United States Pharmacopeia (USP)** is a nonprofit organization that establishes pharmaceutical standards for medications. It also strives to educate individual consumers and patients. One way it does this is through the **USP Pictograms**, graphic images that illustrate how to take and store medications and how to interpret precautions and important information about specific medications. The USP Pictograms can be used to reinforce printed or oral instructions and are useful in literacy and English language learning settings. The entire pictogram library (81 images) can be downloaded from www.usp.org/information/programs/pgrams/index.htm.



Take 1 hour before meals

La Leche League International and the Academy for Educational Development offer a series of six booklets on prenatal care and breastfeeding. Available in English or Spanish, the booklets are targeted to women with limited literacy in either language. They are written in a cartoon format with information portrayed through conversation and pictures. In each episode of the series, the main character, Kathy, moves through her pregnancy, learning about prenatal care and breastfeeding.

The booklets can be ordered through ERIC (800-443-3742; service@edrs.com; <http://orders.edrs.com/Webstore/Express.cfm>). Refer to ERIC Document Reproduction No. ED450008, ED450009, ED450010, ED450011, ED450012, and ED450013. For more information on La Leche League, visit www.lalecheleague.org.



“We all need to be housed. And beyond that we all aim to have a safe and loving place that reflects the best of who we are.”

T rue to its mission of preparing adults for home ownership, the Fannie Mae Foundation, in collaboration with the Adult Literacy Resource Institute of Boston, Massachusetts, has recently published ***Money Management and Home-Buying Readiness: Sourcebook for Teachers of ESOL and ABE***.

The *Sourcebook* is designed for adult-basic-education and English-as-a-second language teachers and program coordinators and administrators who are interested in implementing a home-buying readiness project into their curriculum. The book has four sections:

1. Getting Started: Planning, Implementing, and Evaluating a Home-Buying Readiness Project
2. Supporting a Home-Buying Readiness Project: Fundraising and Resource Development (for program administrators)
3. Expanding Your Resources: Tools for Teachers
4. Appendices: Glossary; Free Resources; Literature With Themes of Home

To receive a free copy of the *Sourcebook*, call the Fannie Mae Foundation at 800-665-0012.

NCLE offers online resources

— on —

**Adult ESL Statistics
Civics & English Literacy
Health Literacy & Adult ESL Instruction**

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Her NCLE's Worth—Continued from page 1

MB: Did students know that this was a need they had?

KS: Absolutely. In the needs assessment I do at the beginning of each instructional cycle, getting a job and health are always the top two topics students want to explore.

MB: What are you teaching now?

KS: I'm teaching ESL workplace classes and designing a curriculum for Fairfax County adult English learners.

MB: Do healthcare issues come up in the ESL workplace classes?

KS: Yes, students come to me all the time with tricky problems and questions about healthcare. As their ESL teacher, I am one of their few points of contact for healthcare information.

MB: Dealing with health literacy necessarily means coming in contact with sensitive issues about students' lives. How do you set the boundaries between teaching English and dealing with these kinds of issues?

KS: Teachers tread a fine line here. The way I see it, we help our students by providing access to information and by letting them know there are options. For example, someone may not know that free clinics exist and that they live right by one. Maybe they don't understand that they can get help for mental issues and that there is probably less of a stigma about mental healthcare here than in their own countries. Also, many students have ruined their credit through nonpayment of medical bills, because they didn't know they could ask for a payment plan.

MB: So, you feel there are issues in healthcare literacy specific to English language learners? They have different instructional needs than native English speakers?

KS: Yes, although there are commonalities, the problems in healthcare are compounded for adult English language learners. Besides the reading problems, beginning-level English learners will not have the oral language to speak to or understand the healthcare provider. Then there are the cultural issues: Immigrant learners may not know what is expected of them regarding healthcare. They may not know that they are responsible for providing their health history

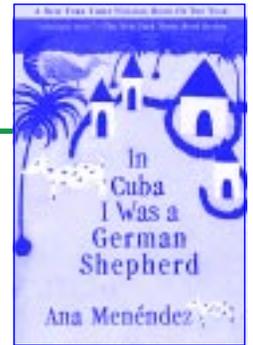
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The Book Shelf

In Cuba I Was a German Shepherd by Ana Menéndez

2001, Grove Press, ISBN 0-8021-3887-X

Reviewed by Miriam Burt



In 1959, Fidel Castro led a successful revolt against the Cuban dictator, Juan Batista. In the 40 plus years since then, hundreds of thousands of Cubans have left their island country, some with permission, many without. Many of the exiles have gotten no farther away than the 90 miles that took them to Miami, Florida, where they number about 700,000.

Ana Menéndez is the daughter of Cuban exiles in Miami. Her book, *In Cuba I Was a German Shepherd*, contains 11 stories that share some of the same characters and are related thematically: They all explore the sadness and pain of exile.

The title story is about Máximo, a retired restaurant owner who is part of a "generation of former professors [who] served rice and beans to the nostalgic" on 8th Street in Little Havana, Miami. His wife dead and his daughters moved away, he plays dominoes in the park with fellow Cuban exile Raúl and two Dominicans. Tourists come by and take pictures of them. Domino Park is, in fact, a stop on trolley tours where the microphone-amplified voice of the tour guide draws the attention of all within the park to the domino players, booming out that the Cuban exiles are a "slice of the past." Máximo hates this, feeling like an animal in the zoo.

Máximo tells jokes to his domino partners. His jokes have a bite that acknowledges the pain of never being really at home in the country he fled to in 1961, thinking he would return to

his "row house of long shiny windows, the piano, the mahogany furniture" in 2 or 3 years' time. The Dominicans call him Professor and laugh at his jokes, but Máximo knows they don't understand all the "layers of hurt in the Cuban jokes." How can the Dominicans understand the specific pain Cuban exiles have faced every day for 40 years knowing that Castro is still in Cuba while they are still in Miami . . . the pain of knowing that no matter where the exiles are or who they become in the United States, they are not who they were in Cuba? Even Juanito, a "little insignificant mutt" in one of Máximo's jokes, maintains that in Cuba he was a German Shepherd.

The constant ache of knowing that one is no longer what one was surfaces over and over in the stories. In "The Story of a Parrot," a 60-year-old woman named Hortencia is reminded of her dreams of being an actress and singer. A vibrantly colored bird flies into her house one day, perches on lamps and china, and drinks from the kitchen tap. The intruder flaps its wings violently, dropping yellow and green feathers in its wake. Finally Hortencia and her husband shoo the bird out of the house. Initially, this disruption of her calm, ordered life upsets Hortencia greatly. A few days later, however, she regrets the parrot's leaving as she regrets her lost stage career, cut short in Havana before she came to the United States.

Although sympathetic to her characters, the author does not romanticize

them. As this story's narrator, she speaks directly to Hortencia, telling her that she herself is responsible for her unfulfilled, gray life: "You could have joined the church choir. When you got to Miami, Mirta asked you to join and you said no. And what of the theater on 8th Street? [You could have been one of] the young kids full of dreams they still wore like golden armbands."

In the final story, "Her Mother's House," a second-generation Cuban exile journalist (perhaps representative of the author) looks for her mother's old plantation home during a visit to Havana and discovers how large the gap can be between memory and reality. This story ties together the themes of the book, including the inevitable separation of second- and third-generation exiles from the life of their parents and their Cuban roots and the disparity between what one remembers and what really was.

In *Cuba I Was a German Shepherd* has been translated into eight languages. This is not surprising. Máximo's feelings aside, loss and longing are not unique to Cuban Americans. The book speaks—or, given the beauty of the prose, actually sings—to all who have left their homes to start again in another country. In fact, one does not need to be an immigrant or interested in immigrants to appreciate this book. The stories will resonate with anyone who has thought about lost dreams and the passage of time. ■

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New ERIC Digests From NCLE

Health Literacy and Adult English Language Learners

by Kate Singleton

This Q&A defines and discusses health literacy in light of special needs and concerns for adult English language learners, instructors, and programs. Health literacy activities for the classroom are described.

Issues in Accountability and Assessment for Adult ESL Instruction

by Carol Van Duzer

This Q&A presents the legislative background of current accountability requirements for ESL programs, issues in testing level gain, and critical questions whose answers can lead the field forward.

Fact Sheets

These concise fact sheets provide an overview of four current issues in the field of adult ESL and discuss their trends and best practices. Additional resources are suggested.

1 Assessment With Adult English Language Learners

2 Family Literacy and Adult English Language Learners

3 Professional Development and Adult English Language Instruction

4 Uses of Technology in Adult ESL Instruction

Using Music in the Adult ESL Classroom

by Kristen Lems

Music can be used to build listening, speaking, reading, and writing skills; increase vocabulary; and expand cultural knowledge. This digest offers strategies for incorporating music into the adult ESL classroom.

Beginning to Work With Adult English Language Learners: Some Considerations

by MaryAnn Cunningham Florez and Miriam Burt

Written for practitioners who want an overview of what adult ESL teachers need to know, this Q&A discusses issues in adult learning, second language acquisition, teaching multicultural groups, and effective instructional approaches.

ERIC Digests (Free)

- Health Literacy and Adult English Language Learners
- Issues in Accountability and Assessment for Adult ESL Instruction
- Reflective Teaching Practice in Adult ESL Settings
- Using Music in the Adult ESL Classroom
- Beginning to Work With Adult English Language Learners: Some Considerations
- Library Literacy Programs for English Language Learners
- Dialogue Journals: Interactive Writing to Develop Language and Literacy
- Civics Education for Adult English Language Learners

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to the service provider and that they need to ask questions and be proactive. The printed materials they get may have examples or pictures that they can't understand or relate to.

MB: Speaking of drawings, you have developed some picture-story activities for health literacy [available on NCLE's Web site at <http://www.cal.org/ncle/health>]. Can you recommend other materials or offer tips to teachers of adult English language learners?

KS: My concern is for the learners with the least education and the least amount of English. They are the least likely to have insurance or any knowledge of healthcare in the United States. Consequently, they are more likely to have serious health problems. Health units in ESL texts usually only scratch the surface. I encourage teachers to look up information on the Web, to check out materials written in plain English, and then to develop their own materials, such as my picture-story activities. Three primary topics to cover are (1) the expectation of personal responsibility in

healthcare, (2) the need for preventative healthcare, and (3) the health and social services available in the local community, especially for people of low income.

“Getting a job and health are the top two topics students want to explore.”

MB: What about projects? Do you recommend doing them with English language learners?

KS: Projects are wonderful. However, beginning-level learners need to learn *basic* healthcare information before they can design a project on a topic of importance in healthcare.

MB: I understand that you have a project of your own that you're working on these days.

KS: Yes, I'm working on a master's degree in clinical social work.

MB: How do you plan to integrate clinical social work with your adult ESL teaching?

KS: I live with chronic health conditions myself and want to counsel people who have chronic illnesses. I also want to continue to develop materials that promote discussion about mental health issues for teachers working with immigrant learners. I want to help teachers to show their students that they do have choices in healthcare and that help is available.

MB: These are definitely areas of importance in health literacy and the ESL teaching field. Thank you, Kate, for talking with NCLE and sharing your insights. ■

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